

MSD Safety Committee Meeting

6/10/02

Minutes

Present (Hill research group in parentheses): J. W. Ager (Chair, Ager), M. Doeff (DeJonghe), K. Priimak (Hou), M. Jin (Chrzan/Morris), T. Koffas (Somorjai), E. Saiz (Tomsia), A. Istratov for H. Feick (Weber), J. Seabury (EHS Liaison), H. Hansen (EHS Hazardous Waste Specialist), J. Song (Bertozzi), D. Ah Tye (NCEM), E. Chung (Healy), R. Schoenlein (Shank), W. Swider (Liliental-Weber), C. Davis (Liliental-Weber), M. Holm (MSD EHS Administrator), C. Weber (Orenstein), D. F. Ogletree (Salmeron).

Absent: J. Beeman (Asst. Chair, Haller), F. Salmassi (B2 Manager), D. Owen (B72 Manager), P. Ruegg (B62/66 Manager), K. Jackson (CXRO), M. Charnahan (Chemla), H. Chang (Chu), N. Mannella (Fadley), E. Bourret (Haller), J. Kruzic (Ritchie), N. Markovic (Ross), M. Van Hove (Van Hove), V. Vreeland (Vreeland).

Groups without representatives: None.

Status of MSD performance in selected EH&S areas 7/01 – present (Ager)

J. Ager presented the status of MSD performance in the current evaluation period in the following EHS areas.

- Training of MSD employees/guests. As of 6/6/02, MSD JHQ completion was $350/517 = 68\%$. This would merit a “partial” or yellow” rating. When corrected for campus-only employees/guests, the JHQ completion rate was $>90\%$, which would merit a “green” rating. It was discovered that a number of individuals had filled out a paper JHQ, which was sent to EHS for data entry, but these individuals' JHQs do not show up as having been completed. The committee decided to concentrate on achieving a Hill JHQ completion rate of 100%, while putting JHQ completion of campus employees/guests, who are required to file a JHQ by MSD (but not by LBNL) policy at a lower priority. It was decided that the MSD EHS Administrator, with support as required from the MSD Division office, would work on this task, which involves sending reminder e-mails to MSD supervisors. The committee recommended that the Hill JHQ completion rate should be reported in the Self Assessment report. As of 6/6/02, MSD Training Completion was $1454/1740 = 84\%$. This would merit a “partial” or yellow” rating. However, many persons listed with unfulfilled training requirements are campus-only employees/guests, who are not required to take LBNL training courses. When these individuals are removed from the database, the training completion rate is 92%, which would merit a “green” rating. Many of the unfulfilled training requirements involve General Employee Radiation Training (GERT) and Ergonomics Training (which is now a required course for most MSD employees/guests). As with the JHQ, the committee recommended that MSD

concentrate on increasing the training rates of its Hill employees/guests via supervisor e-mails, web training (when available), and signing up employees/guests for classroom training. The committee recommended that the Hill training completion rate should be reported on the Self Assessment report.

- Laboratory Corrective Action Tracking System (LCATS) completion. With the exception of the B62 outbuildings, all MSD space was inspected during the evaluation period. As of 6/6/02, 69 of 109 deficiencies had been corrected and the uncorrected deficiencies had been scheduled for completion (As of 6/17/02, there are only ca. 12 uncorrected deficiencies; these are predominantly electrical and have been scheduled for completion).
- MSD performance in hazardous waste management including SAA compliance rate and waste QA. MSD performance in these areas was discussed. H. Hansen indicated that the cost of analytical testing of unknowns was in the range of several hundred \$ per test. Committee members mentioned that this creates a disincentive for disposing of legacy waste, particularly in cases where it has been left by other research groups.
- Completion of Supervisor Accident Analysis Reports (SAARs). J. Seabury discussed the requirements for filling out this form and stressed the importance of thinking about the answer to the question, "What could have prevented this incident?" It is not considered acceptable to blame the employee/guest for the incident. In the specific case of the example SAAR that was discussed, use of non-breakable labware (e.g. Teflon) or a policy of discarding heavily soiled glassware might have prevented the incident, and these alternatives could have been considered as corrective actions.
- Renewal of Activity Hazard Documents (AHDs). M. Holm indicated that 100% of these should be renewed by 6/30/02.

Ergonomics Program within MSD

- This was an action item from the previous meeting. John Seabury discussed a three phase plan for an Ergonomics Program within MSD. It was stated that most MSD workstations do not meet current ergonomics standards. The proposed first phase of the program is to perform an ergonomic workstation survey (including both computer and non-computer workstations) to document and prioritize the need for equipment modifications and training. The committee agreed to recommend to MSD management that this first phase of the proposed program could be accomplished by the end of the calendar year. A possible implementation scheme would be to require that each research group perform the survey and report the results to the MSD EHS Administrator. EHS personnel would provide assistance and training to those performing the survey. Any survey not performed by the research group would be performed by MSD staff (e.g. building managers), possibly on a recharge basis. Completion of the task could be tracked by the LCAT database.